



## Campaign Finance Section Financial Report

Financial Reports are required to be submitted to the Campaign Finance Section of the Office of the State Election Commissioner by all Candidates, Committees, and Organizations. Late or incomplete reports are subject to fines levied by the Commissioner's Office, so please be sure to check all applicable deadlines and file on time. Add extra sheets if necessary.

Full Organization Name: Friends of Lisa Diller

Account Number: \*\*\*\*\* Date of this Report: 01/15/2010

Reporting Period Start: 02/12/2009 Reporting Period End: 12/31/2009

Office: County Council - New Castle County / District 05

Check the box that applies to this report:

Primary Election	<u>      </u> 8-DAY	<u>      </u> 30-DAY
General Election	<u>      </u> 8-DAY	<u>      </u> 30-DAY
Other Election	<u>      </u> 8-DAY	<u>      </u> 30-DAY
Special Election	<u>      </u> 8-DAY	<u>      </u> 30-DAY

  X   YEAR END

Final Organization Closing:	<u>      </u> YES	<u>  X  </u> NO	Closing Date:	<u>                    </u>
Amendment:	<u>      </u> YES	<u>  X  </u> NO		

I authorize that all information included in this Financial Report package is accurate and correct. I agree to abide by all rules and regulations regarding Campaign Finance and the election process in the State of Delaware. I understand that representatives from the Office of the State Election Commissioner will perform an audit of all information provided on this report.

TREASURER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CANDIDATE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



## STATEMENT OF ACCOUNT BALANCE

Account Number:	*****	Reporting Period:	02/12/2009 FROM	12/31/2009 TO
1. BEGINNING BALANCE (Ending Balance from last reporting period)				\$10,766.93
2. RECEIPTS:				
A. SCHEDULE A - TOTAL RECEIPTS				\$2,786.29
B. SCHEDULE C-1 - TOTAL IN-KIND RECEIPTS				\$0.00
C. SCHEDULE D-1 - TOTAL LOANS RECEIVED				\$0.00
D. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS RECEIVED				\$0.00
E. SUBTOTAL (Total of A,B,C,D)				\$2,786.29
3. EXPENDITURES:				
F. SCHEDULE B - TOTAL EXPENDITURES				\$3,002.19
G. SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES				\$0.00
H. SCHEDULE D-2 - TOTAL LOAN PAYMENTS				\$3,449.76
I. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS PAID				\$0.00
J. SUBTOTAL (Total of F,G,H,I)				\$6,451.95
4. ENDING BALANCE (Beginning Balance plus 2E minus 3J)				\$7,101.27
5. VALUE OF NON-CASH ASSETS (From Schedule F)				\$0.00
6. VALUE OF DISPOSED/TRANSFERRED ASSETS (From Schedule G)				\$0.00
7. VALUE OF LOANS AT END OF PERIOD (Loan Balance From Schedule D-2)				\$0.00
8. CLOSE OUT BALANCE (Must equal zero if committee closed)				\$7,101.27



## SCHEDULE A - TOTAL RECEIPTS

Account Number: \*\*\*\*\* Reporting Period: 02/12/2009 12/31/2009  
FROM TO

Itemize all receipts over \$100 for the reporting period. Receipts from sales of items must be itemized if they are over \$50. NOTE: If you receive funds from the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

### RECEIPTS IN EXCESS OF \$100:

Date Received	Contributor Name	Contributor Mailing Address	Aggregate Amount	Amount Received
02/18/2009	John Tobin	182 King William St, Newark,De 19711	\$500.00	\$100.00
02/15/2009	John D Flaherty	712 W 26th St,Wilmington,De 19802	\$30.00	\$30.00
02/12/2009	Steve Beard	308 ParkPlace,Newark,De19711	\$50.00	\$50.00
02/12/2009	Richard Gays	11 Amherst Drive,Newark,De 19711	\$50.00	\$50.00
02/12/2009	Saull Ewing,LLP	PO Box 1266,Wilm,De 19899	\$200.00	\$200.00
02/13/2009	Walsh for Wilmington	2013 N Tatnall St, Wilmington,De 19802	\$300.00	\$300.00
02/15/2009	Friends of Bill Powers	324 VandykeMdLine Rd,Townsend,De	\$25.00	\$25.00
02/15/2009	Nancy Breslin	237 Cheltenham Rd,Newark,De 19711	\$50.00	\$50.00
02/15/2009	George Meldrum	211 S Ogle Ave,Wilmington,De 19805	\$20.00	\$20.00
02/15/2009	Pamela Green	80 Ethan Allen Court,Newark,De 19711	\$50.00	\$50.00
02/15/2009	Donna Reda	19 Vilone Rd.Wilmington,De19805	\$25.00	\$25.00
02/15/2009	Mike Walsh	800 N French St, Wilmington,De 19801	\$100.00	\$100.00
02/15/2009	Bethany Hall-Long	127 Saint Augustine Ct,Middletown,De	\$100.00	\$100.00
02/15/2009	Stephanie Flores-Koulish	418 Lark Drive, Newark,De 19713	\$50.00	\$50.00
02/15/2009	Kristina Jackson	119 Tyre Ave,Newark,De 19711	\$15.00	\$15.00
02/15/2009	The Denn Campaign	PO Box 1327,Dover, De 19903	\$200.00	\$200.00

02/15/2009	Calrk for Council	209 Meadowdale Dr,Newark,De 19711	\$100.00	\$100.00
02/15/2009	Frank Dilley	Jenner's Pond,Pa	\$20.00	\$20.00
02/15/2009	Ted Thomson	Wilmington,De	\$20.00	\$20.00
02/17/2009	Marilyn Doto	306 W 14th St, Wilmington,De 19801	\$25.00	\$25.00
02/18/2009	Ellen Casson	4000 Coleridge Rd,Wilm,De 19802	\$50.00	\$50.00
02/17/2009	Citizens for Coons	PO Box 9900,Newark,De 19711	\$250.00	\$250.00
02/17/2009	Peterson for Senate	130 W Newport Pike,Wilm,De19804	\$250.00	\$250.00
02/19/2009	Mary Herr	341 Greenbriar Ln,West Grove,Pa	\$100.00	\$100.00
02/19/2009	Edward Cooch,Jr	961 Old Baltimore Pike,Newark,De	\$50.00	\$50.00
02/19/2009	Michael Barbieri	88 Iroquios Ct,Newark,De 19702	\$150.00	\$150.00
02/20/2009	Ennis Senate Campaign	522 Smyrna-ClaytonRd,Smyrna,De	\$100.00	\$100.00
<b>TOTAL RECEIPTS IN EXCESS OF \$100</b>				<b>\$2,480.00</b>
<b>TOTAL RECEIPTS NOT IN EXCESS OF \$100</b>				<b>\$306.29</b>
<b>GRAND TOTAL RECEIPTS (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2A)</b>				<b>\$2,786.29</b>



## SCHEDULE B - TOTAL EXPENDITURES

Account Number: \*\*\*\*\* Reporting Period: 02/12/2009 12/31/2009  
FROM TO

Itemize all expenditures over \$100 for the reporting period. All expenditures to Political Committees must be itemized, regardless of the amount. NOTE: IF you expend funds to the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

### EXPENDITURES IN EXCESS OF \$100:

Date Expended	Payee Name	Payee Mailing Address	Aggregate Amount	Amount Expended
12/01/2009	NewCastleCountyDemCommittee	19 E Commons Blvd, New Castle, de	\$150.00	\$150.00
02/12/2009	BCD Systems	486 First State Blvd, Wilm, De 19804	\$569.12	\$569.12
02/12/2009	US Postmaster	Newark, De 19711	\$726.59	\$726.59
02/12/2009	US Postmaster	Newark, De 19711	\$1,327.70	\$601.11
02/13/2009	Sign-A-Rama	307 Newark Shopping Ctr, Newark, De	\$175.37	\$175.37
02/19/2009	UnitarianUniversalistFellowship	WillaRd, Newark, De 19711	\$230.00	\$230.00
07/27/2009	Friends of Polly	Bridgeville, De	\$100.00	\$100.00
11/09/2009	Committee to Elect John Kowalko	134 N DillwynRd, Newark, De 19711	\$300.00	\$300.00
12/08/2009	Newark Chorale	Newark, De 19711	\$150.00	\$150.00
<b>TOTAL EXPENDITURES IN EXCESS OF \$100</b>				<b>\$3,002.19</b>
<b>TOTAL EXPENDITURES NOT IN EXCESS OF \$100</b>				<b>\$0.00</b>
<b>GRAND TOTAL EXPENDITURES</b> (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3F)				<b>\$3,002.19</b>







## SCHEDULE D-1 - LOANS RECEIVED

Account Number:                     \*\*\*\*\*                     Reporting Period:                     02/12/2009                                         12/31/2009                      
FROM TO

All loans in excess of \$50 **RECEIVED DURING THIS REPORTING PERIOD** should be itemized on this schedule. NOTE: These loans must also be listed on Schedule D-2.

### LOANS RECEIVED IN EXCESS OF \$50:

Date Received	Lender	Endorser	Description of Security	Int. Rate	Amount Received
TOTAL LOANS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2C)					





## SCHEDULE D-2 - LOANS

Account Number: \*\*\*\*\* Reporting Period: 02/12/2009 12/31/2009  
FROM TO

All outstanding loans in excess of \$50 must be listed. This includes loans from Lending Institutions, Candidates Personal Funds and Other Contributors.

### LOANS IN EXCESS OF \$50:

Date Rec'd	Lender	Endorser	Description	I n t Rate	Orig. Loan Amt	Payments Made	Balance
02/02/2009	Lisa Diller 182 King WilliamSt	Lisa Diller 182 King William St	Unsecured	0.00%	\$200.00	\$200.00	\$0.00
01/26/2009	Lisa Diller 182 King WilliamSt	Lisa Diller 182KingWilliamSt	Unsecured	0.00%	\$109.75	\$109.75	\$0.00
02/01/2009	Lisa Diller 182 King William St	Lisa Diller 182 King WilliamSt	Unsecured	0.00%	\$611.73	\$611.73	\$0.00
02/09/2009	Lisa Diller 182 King WilliamSt	Lisa Diller 182 King WilliamSt	Unsecured	0.00%	\$200.00	\$200.00	\$0.00
02/04/2009	Lisa Diller 182 King WilliamSt	Lisa Diller 182 King William St	Unsecured	0.00%	\$1,538.78	\$1,538.78	\$0.00
02/04/2009	Lisa Diller 182 King WilliamSt	Lisa Diller 182 King WilliamSt	Unsecured	0.00%	\$527.88	\$527.88	\$0.00
02/10/2009	Lisa Diller 182 King WilliamSt	Lisa Diller 182 King WilliamSt	Unsecured	0.00%	\$261.62	\$261.62	\$0.00
<b>TOTAL LOANS</b> (TOTAL PAYMENTS MADE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 3H. TOTAL LOAN BALANCE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 7.)					<b>\$3,449.76</b>	<b>\$3,449.76</b>	<b>\$0.00</b>



## SCHEDULE E - EXPENSE REIMBURSEMENTS

Account Number: \*\*\*\*\*

Reporting Period:

02/12/2009

FROM

12/31/2009

TO

All expense reimbursements received by you and paid by you must be itemized.

### REIMBURSEMENTS RECEIVED (Monies paid to you as reimbursements for expenses you incurred.)

Date Received	Reimburer	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2D.)					

### REIMBURSEMENTS PAID (Monies paid by you to reimburse others for expenses they incurred.)

Date Paid	Payee	Description of Activity	Activity Date	Total Expense	Reimbursement
TOTAL REIMBURSEMENTS PAID (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3I.)					



## SCHEDULE F - NON-CASH ASSETS

Account Number: \*\*\*\*\*

Reporting Period: 02/12/2009  
FROM

12/31/2009  
TO

Itemize all non-cash assets owned by the organization including those paid for by the organization, lent to the organization and contributed to the organization.

### LIST ALL NON-CASH ASSETS

Date Received	Description of Asset	Location of Asset (Physical Address)	Value of Asset
TOTAL ASSET VALUE (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 5.)			



## SCHEDULE G - ELIMINATION OF ASSETS

Account Number: \*\*\*\*\* Reporting Period: 02/12/2009 12/31/2009  
FROM TO

Itemize all non-cash assets disposed of, transferred or sold by the organization during the reporting period.

### LIST ALL ELIMINATED ASSETS

Date Eliminated	Description of Asset	Disposition of Asset	Value Received
TOTAL ASSETS ELIMINATED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 6.)			